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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 430.00)
**Complete if Known**

Application Number	10/070979-Conf. #4774
Filing Date	May 31, 2002
First Named Inventor	Pierre Dournel
Examiner Name	A. R. Kuhns
Art Unit	1732
Attorney Docket No.	05129-00053-US

**METHOD OF PAYMENT (check all that apply)**
 Check  Credit Card  Money Order  Other  None  
 Deposit Account:

Deposit Account Number **03-2775**  
 Deposit Account Name **Connolly Bove Lodge & Hutz LLP**

## The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	430	2252	215
1253	980	2253	490
1254	1,530	2254	765
1255	2,080	2255	1,040
1401	340	2401	170
1402	340	2402	170
1403	300	2403	150
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,370	2453	685
1501	1,370	2501	685
1502	490	2502	245
1503	660	2503	330
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	790	2809	395
1810	790	2810	395
1801	790	2801	395
1802	900	1802	900
Other fee (specify)		SUBTOTAL (3) (\$ 430.00)	

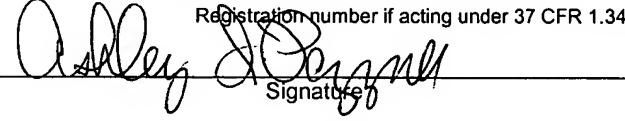
\*Reduced by Basic Filing Fee Paid

\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY			(Complete if applicable)	
Name (Print/Type)	Ashley L. Pezzner	Registration No. (Attorney/Agent)	35,646	Telephone (302) 658-9141
Signature	Ashley L. Pezzner		Date	10/11/04



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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b> (fees effective on or after October 1, 2004)		Docket Number (Optional) 05129-00053-US
Application Number	10/070979-Conf. #4774	Filed May 31, 2002
For METHOD FOR MAKING POLYMERIC FOAMS		
Art Unit 1732	Examiner	A. R. Kuhns
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-2775</u> . I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
<input type="checkbox"/> attorney or agent of record. Registration Number _____		
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>35,646</u>		
 Signature _____		
Ashley I. Pezzner Typed or printed name		
Date <u>10/11/04</u>		
Telephone Number <u>(302) 658-9141</u>		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of <u>1</u> forms are submitted.		

10/18/2004 EAREGAY1 00000028 10070979

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430.00 (IP)